

## HARLAN-CUMBERLAND COAL COMPANY, LLC.

GENERAL DELIVERY, US 421 SOUTH, GRAYS KNOB, KY 40829

Phone (606) 837-3791

Phone (606) 573-2232

2008

December 26, 2007

Ms. Vickie Prather, Acting Supervisor Division of Water, KPDES Branch Inventory and Data Management Section Frankfort Office Park 14 Reilly Road Frankfort, Kentucky 40601

RE: KPDES Permit
No.: KY0021539

Harlan County Kentucky

JAN 2

Dear Ms. Prather:

Enclosed is a "Renewal" for the above referenced KPDES permit(With Fee). Water samples from each pond were collected and are currently being analyzed. These sample results will be submitted as soon as they are completed.

Please contact me at (606) 837-3791 if you have any questions concerning this renewal.

Respectfully,

Brandon Wilson

# SCANNED/QC

#### HARLAN-CUMBERLAND COAL COMPANY, LLC.

PO Box 269, GRAYS KNOB, KY 40829
Phone (606) 837-3791 Phone (606) 573-2232

May 15, 2008

MAY 2 0 2008

Division of Water, KPDES Branch Attn: Mr. Allen Ingram II 14 Reilly Road, Frankfort Office Park Frankfort, Kentucky 40601

RE: KPDES Permit
No.: KY0021539
HARLAN County Kentucky

Dear Mr. Ingram:

Please find enclosed the corrections as requested for the KPDES permit listed above. The following items have been addressed.

1) Section V (A, B, and C) is now completed and attached.

Please contact me at (606) 837-3791 if you have any questions concerning this renewal.

Respectfully,

Brandon Wilson

Brandon Wilson Harlan-Cumberland Coal Company

### HARLAN-CUMBERLAND COAL COMPANY, LLC.

PO Box 269, GRAYS KNOB, KY 40829
Phone (606) 837-3791 Phone (606) 573-2232

July 31, 2008

Division of Water, KPDES Branch Attn: Ms. Morgan Elliston 14 Reilly Road, Frankfort Office Park Frankfort, Kentucky 40601



RE: KPDES Permit
No.: KY0021539
HARLAN County Kentucky

Dear Ms. Elliston:

Please find enclosed the corrections as requested for the KPDES permit listed above. The following items have been addressed.

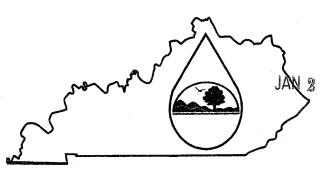
1) Sections circled in red on Form C.

Please contact me at (606) 837-3791 if you have any questions concerning this renewal.

Respectfully, Burnson Wilson,

Harlan-Cumberland Coal Company

# **KPDES FORM 1**



### KENTUCKY POLLUTANT DISCHARGE ELIMINATION SYSTEM

2008

### PERMIT APPLICATION

This is an application to: (check of	one)	A complete applie following:	cation co	onsists	of thi	is form	and or	ne of th	e
Apply for a new permit.  Apply for reissuance of exp		Form A, Form B,	Form C	C, Form	F, or	Short	Form	C	
Apply for a construction pe	ermit.	373 31.35121 31.15	· C 4	··		_			
Modify an existing permit.	dow Idomo III. A	For additional in KPDES Branch				•			
Give reason for modification	on under item II.A.	AGENCY	(302) 31	04-341	U	[	T		—T
I. FACILITY LOCATION AN	D CONTACT INFORMATION	USE							
A. Name of business, municipality, comp Harlan Cumberland Coal Company, LLC									
B. Facility Name and Location	·	C. Facility Own	ner/Mai	ling A	ddress	3			
Facility Location Name:	,	Owner Name:							
Harlan-Cumberland Coal Company, LLC		Harlan Cumberlan	d Coal Co	ompany I	LLC				
Facility Location Address (i.e. street, roa	d, etc.):	Mailing Street:							
Routel Box 374		General Delivery,	US 421 S	outh					
Facility Location City, State, Zip Code:		Mailing City, State						•	
Evarts, Kentucky 40828		Grays Knob, Kenti	ucky 4082	29					
Diam, Rollway 10000	Telephone Number 606-837-3791			······································					
AND THE RESERVE OF THE PROPERTY OF THE PROPERT									
A. Provide a brief description o system wich utilizes a slurry	of activities, products, etc: This Factor impoundment structure and sedim	cility is a Coal Prepent pond for the pr	peration rocessin	Plant.	This w coa	facility d.	is clos	sed circ	cuit
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IV. OWNER/OPERATOR INFORMA	ATION		
A. Type of Ownership:	3. 3. 3. 3. 3. 1		
☐ Publicly Owned ☐ Privately O	wned State Owned	Both Public and Pri	ivate Owned  Federally owned
B. Operator Contact Information (See in			
Name of Treatment Plant Operator:		Telephone Number:	
Harlan Cumberland Coal Company, LLO	C	606-837-3791	
Operator Mailing Address (Street):			
Route 1 Box 374		·	
Operator Mailing Address (City, State, Zip Code): Evarts, KY 40828			
Is the operator also the owner?		Is the operator certified	? If yes, list certification class and number below.
Yes ⊠ No □		Yes No	
Certification Class:		Certification Number:	
V. EXISTING ENVIRONMENTAL I			
Current NPDES Number:	Issue Date of Current Per	rmit:	Expiration Date of Current Permit:
KY0021539	July 1, 2004		June 30, 2008
Number of Times Permit Reissued:	Date of Original Permit I	ssuance:	Sludge Disposal Permit Number:
2	0 1 16 1000		27/4
Kentucky DOW Operational Permit #:	Sept, 16,1983 Kentucky DSMRE Perm	it Number(s)	N/A
rentucky 190 W Operational Lening ".	Rondony Domina 1 cm	n rumber(s).	
N/A	848-8071		
C. Which of the following additional en	vironmental permit/registr	ration categories will a	also apply to this facility?  PERMIT NEEDED WITH
CATEGORY	EXISTING PE	RMIT WITH NO.	PLANNED APPLICATION DATE
Air Emission Source	N/A		
Solid or Special Waste	N/A		
Hazardous Waste - Registration or Perm	it N/A		
Table 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			
		· · ·	A company to the second
VI. DISCHARGE MONITORING R			
KPDES permit holders are required to	submit DMRs to the Di	ivision of Water on a	regular schedule (as defined by the KPDES
		tify the department, o	ffice or individual you designate as responsible
for submitting DMR forms to the Divisi	on or water.		
A. Name of department, office or officia	l submitting DMRs	Harlan Cumherland	d Coal Company, LLC
VI WYPON MAIVING VIIIVE VI VIIIVIL		1 TIME CHILDONIAN	Court Company, DDC
B. Address where DMR forms are to be	sent. (Complete only if ac	ldress is different fron	n mailing address in Section I.)
DMR Mailing Name:	same		
DMR Mailing Street:			
DMR Mailing City, State, Zip Code:			
DMR Official Telephone Number:			

3.733	ADDI	TOL	TION	1711	ENIC	100 100 100
VII.	APPI	.IC.A	IIII	MII	IINI-	H H H

KPDES regulations require that a permit applicant pay an application filing fee equal to twenty percent of the permit base fee. Please examine the base and filing fees listed below and in the Form 1 instructions and enclose a check payable to "Kentucky State Treasurer" for the appropriate amount. Descriptions of the base fee amounts are given in the "General Instructions."

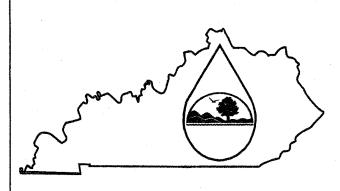
Facility Fee Category:	Filing Fee Enclosed:
Surface Mining Operation	\$240.00

#### VIII. CERTIFICATION

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

NAME AND OFFICIAL TITLE (type or print):	TELEPHONE NUMBER (area code and number):
Joseph T. Bennett, Managing Member	606-573-2232
SIGNATURE	DATE:
Son 2 Bennett	12/26/07

## **KPDES FORM C**



### KENTUCKY POLLUTANT DISCHARGE ELIMINATION SYSTEM

JAN 2 2008

#### PERMIT APPLICATION

A complete application consists of this form and Form 1. For additional information, contact KPDES Branch, (502) 564-3410.

Name of Facility: Harlan-Cumberland Coal Company, LLC.	County: Harlan					
	AGENCY					
I. OUTFALL LOCATION	USE		l			
	. 1 7 1 1 1 1 1		C -1	 ·	-	

For each outfall list the latitude and longitude of its location to the nearest 15 seconds and the name of the receiving water.

Outfall No.		LATITUDE			LONGITUDE	3		
(list)	Degrees	Minutes	Seconds	Degrees	Minutes	Seconds	RECEIVING WATER (name)	
SG-1	36	53	. 34	83	06	57	Seagraves Creek	
108	36	53	43	83	07	05	Seagraves Creek	

#### II. FLOWS, SOURCES OF POLLUTION, AND TREATMENT TECHNOLOGIES

- A. Attach a line drawing showing the water flow through the facility. Indicate sources of intake water, operations contributing wastewater to the effluent, and treatment units labeled to correspond to the more detailed descriptions in Item B. Construct a water balance on the line drawing by showing average flows between intakes, operations, treatment units, and outfall. If a water balance cannot be determined (e.g., for certain mining activities), provide a pictorial description of the nature and amount of any sources of water and any collection or treatment measures.
- B. For each outfall, provide a description of: (1) all operations contributing wastewater to the effluent, including process wastewater, sanitary wastewater, cooling water, and storm water runoff; (2) the average flow contributed by each operation; and (3) the treatment received by the wastewater. Continue on additional sheets if necessary.

OUTFALL NO.	OPERATION(S) CONTR	IBUTING FLOW	TREATM	ENT
(list)	Operation (list)	Avg/Design Flow (include units)	Description	List Codes from Table C-1
SG-1	Preparation Plant	250 GPM	Sedimentation Pond	1-U
108	Unit Train Loadout	100 GPM	Sedimentation Pond	1-U

	Yes	(Complete the	following ta	ble.)		No (Go	o Section III.)		
OUTFALL	OP	ERATIONS	FREQU	ENCY			FLOW		
NUMBER	CON	TRIBUTING FLOW	Days Per Week	Months Per Year		Rate ngd)	1	volume with units)	Duration (in days)
(list)		(list)	(specify average)	(specify average)	Long-Term Average	Maximum Daily	Long-Term Average	Maximum Daily	
		<u></u>							
III. MAXIM	IUM PI	RODUCTION							
A. Does an o	ffluent	guideline limita	ation promul	gated by E	PA under Secti	on 304 of the C	lean Water Ac	t apply to your	facility?
		•		_	uideline catego			<b>•</b>	-
<b>,</b> , —						•			
П	No		,						
		(Go to Section	IV)	J	Ţ.		, a	c	• \0
B. Are the li		(Go to Section	IV)	guideline e	Ţ.	ms of producti	on (or other me	asures of operat	tion)?
B. Are the li	mitation	(Go to Section	IV) able effluent	J	Ţ.	-	on (or other me	asures of opera	ion)?
☐ C. If you an	mitation Yes	(Go to Section as in the application (Complete Iter "Yes" to Item essed in the terr	IV) able effluent m III-C) n III-B, list ms and units	guideline e	No (Go to S ty which repressapplicable effl	Section IV)	nl measuremen	asures of operated of your maxing affected outfar	mum level o
C. If you ar production	Yes swered n, expre	(Go to Section as in the application (Complete Iter	IV) able effluent m III-C) n III-B, list ms and units	guideline e	No (Go to Sty which representations)	Section IV) esents the actual	al measuremen and indicate th	t of your maxine affected outfa	mum level o lls.
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B. OPTIONAL: You may attach additional sheets describing any additional water pollution control programs (or other environmental projects which may affect your discharges) you now have under way or which you plan. Indicate whether each program is now under way or planned, and indicate your actual or planned schedules for construction.

POLI	LUTANT	SOURCE	POLLUTANT	SOURCE
**************************************	·.			
I. POTEN	TIAL DISCHARGES N	NOT COVERED BY ANA	LYSIS	
		a substance or a component immediate or final produc	t of a substance which you use or procest or byproduct?	luce, or expect to use or
	Yes (List all such po	•	No (Go to Item VI-B)	
Champhalpard  Weighted College of the College of th				Anna vita vita ana kana ana ana ana ana ana ana ana a
		wary mataniala wasaaraa	or products can reasonably be expected	
			times the maximum values reported	in Item V?
		g the next 5 years exceed tw		in Item V?
discharge  C. If you an expected	Yes (Complete Item swered "Yes" to Item VI	g the next 5 years exceed two VI-C) No  No  -B, explain below and described which you anticipate will be	to times the maximum values reported	at this time the sources a
discharge   If you an expected	Yes (Complete Item swered "Yes" to Item VI levels of such pollutants	g the next 5 years exceed two VI-C) No  No  -B, explain below and described which you anticipate will be	or times the maximum values reported (Go to Item VII)  ribe in detail to the best of your ability	at this time the sources a
discharge  C. If you an expected	Yes (Complete Item swered "Yes" to Item VI levels of such pollutants	g the next 5 years exceed two VI-C) No  No  -B, explain below and described which you anticipate will be	or times the maximum values reported (Go to Item VII)  ribe in detail to the best of your ability	at this time the sources a
discharge  C. If you an expected	Yes (Complete Item swered "Yes" to Item VI levels of such pollutants	g the next 5 years exceed two VI-C) No  No  -B, explain below and described which you anticipate will be	or times the maximum values reported (Go to Item VII)  ribe in detail to the best of your ability	at this time the sources a

V. INTAKE AND EFFLUENT CHARACTERISTICS

VII. BIOLOGICAL TOXIC	ITY TESTING DATA		
Do you have any knowledge of o			xicity has been made on any of your
Yes (Identify t	he test(s) and describe their purpos	ses below)	No (Go to Section VIII)
VIII. CONTRACT ANALYS	SIS INFORMATION		
Were any of the analyses reporte	ed in Item V performed by a contra	ct laboratory or consulting firm	<b>n?</b>
	ame, address, and telephone number by each such laboratory or firm be		No (Go to Section IX)
NAME	ADDRESS	TELEPHONE (Area code & number)	POLLUTANTS ANALYZED (list)
ENVIRONMENTAL & ENERGY SERVICES, INC.	309 RIVER STREET SUITE 2 HARLAN KENTUCKY 40831	606-573-2552	Flow, pH, total suspended solids, total iron, total manganese, total hardness, sulfates Antimony, Arsenic, Beryllium, Cadmium, Chromium (Total) Copper, Lead, Mercury, Nickel, Selenium, Silver, Thallium, Zinc, Cyanide, Phenols
IX. CERTIFICATION			
with a system designed to assure of the person or persons who masubmitted is, to the best of my k submitting false information, inc	that qualified personnel properly ganage the system, or those persons nowledge and belief, true, accurate luding the possibility of fine and in	gather and evaluate the information directly responsible for gather e, and complete. I am aware the apprisonment for knowing violate TELEPHONE NUM	rection or supervision in accordance ation submitted. Based on my inquiry ring the information, the information hat there are significant penalties for ations.  BER (area code and number):
Joe T. Bennett, Member SIGNATURE	Marit	(606) 837 - 3791 DATE /2/26/	67

PLEASE PRINT OR TYPE IN THE UNSHADED AREAS ONLY. You may report some or all of this information on separate sheets (use the same format) instead of completing these pages. (See instructions)

V. INTAKE AND										OUTFALL NO.	SG-1	
Part A – You must	provide the result	s of at least one	analysis for every p	ollutant in this tal 2. EFFLUENT	ole. Complete one tab	le for each outfa	II. See instructions	for additional detail 3. UNI (specify if	ΓS		I. INTAKE (optional)	
1. POLLUTANT	a. Maximum	Daily Value	b. Maximum 3 (if avai		c. Long-Term A		d. No. of	a. Concentration	b. Mass	a. Long-Term		b.
	(1) Concentration	(2) Mass	(1) Concentration	(2) Mass	(1) Concentration	(2) Mass	Analyses			(1) Concentration	(2) Mass	No of Analyses
a. Biochemical Oxygen Demand (BOD)												
b. Chemical Oxygen Demand (COD)												
c. Total Organic Carbon (TOC)										·		
d. Total Suspended Solids (TSS)	,	7 58.40	N/A	N/A	N/A	N/A	2	PPM	LBS/MG			
e. Ammonia (as N)												
f. Flow (in units of MGD)	VALUE	0.004	VALUE		VALUE		2		MGD	VALUE		
g. Temperature (winter)	VALUE	34°F	VALUE		VALUE				°c	VALUE		
h. Temperature (summer)	VALUE	73 ° F	VALUE		VALUE				°c	VALUE		
i. pH	MINIMUM 7.58	MAXIMUM 8.31	MINIMUM	MAXIMUM			2	STANI	DARD UNITS			

Part B - In the MARK "X" column, place an "X" in the <u>Believed Present</u> column for each pollutant you know or have reason to believe is present. Place an "X" in the <u>Believed Absent</u> column for each pollutant you believe to be absent. If you mark the <u>Believed Present</u> column for any pollutant, you must provide the results of at least one analysis for that pollutant. Complete one table for each outfall. See the instructions for additional details and

requirements.  1. POLLUTANT		2. K "X"			EF	3. FLUENT			. 750 m. m.	4. UNITS	16: 454, 541	INTAF	6. Œ (option	al)
AND CAS NO.	a.	ъ.	a. Maximum Da	ily Value	b. Maximum 3 Value (if avai	0-Day	c. Long-Tern Value (if ava		d. No. of	a.	b,	a. Long-Term Value	Avg	b. No. of
(if available)	Believed Present	Believed Absent	(1) Concentration	(2) Mass	(1) Concentration	(2) Mass	(1) Concentration	(2) Mass	Analyses	Concentration	Mass	(1) Concentration	(2) Mass	Analyses
a. Bromide (24959-67-9)		Х												
b. Bromine Total Residual		Х												
c. Chloride		Х												<u></u>
d. Chlorine, Total Residual		X												
e. Color		x												
f. Fecal Coliform		х												
g. Fluoride (16984-48-8)		х												
h. Hardness (as CaCO <sub>3</sub> )	x		80	668					2	PPM	#/MG			
i. Nitrate – Nitrite (as N)		х												
j. Nitrogen, Total Organic												•		
(as N) k. Oil and		X				<del>                                     </del>								
Grease 1. Phosphorous (as P), Total 7723-14-0		X												
m. Radioactivity						3,								
(1) Alpha, Total		x												
(2) Beta, Total		x												
(3) Radium Total		x												
(4) Radium, 226, Total		x												

Part B - Continu 1. POLLUTANT		2. K "X"				3. FLUENT				4. UNITS			5. Œ (option	
And CAS NO.	a.	b.	a. Maximum Dail	y Value	b. Maximum 3 Value (if avai		c. Long-Tern Value (if avai		d. No. of	2.	b.	a. Long-Term Avg	. Value	b. No. of
(if available)	Believed Present	Believed Absent	(1) Concentration	(2) Mass	(1) Concentration	(2) Mass	(1) Concentration	(2) Mass	Analyses	Concentration	Mass	(1) Concentration	(2) Mass	Analyses
n. Sulfate (as SO <sub>4</sub> ) (14808-79-8)	х		160	1336					2	PPM	#/MG			
o. Sulfide (as S)		х												
p. Sulfite (as SO <sub>4</sub> ) (14286-46-3)		х	·											
q. Surfactants		х												
r. Aluminum, Total (7429-90)		х										,		
s. Barium, Total (7440-39-3)		х												
t. Boron, Total (7440-42-8)		х												
u. Cobalt, Total (7440-48-4)		х												
v. Iron, Total (7439-89-6)	х		0.03	0.25					2	PPM	#/MG			
w. Magnesium Total (7439-96-4)		x												
x. Molybdenum Total (7439-98-7)		х												
y. Manganese, Total (7439-96-6)	х		0.0	0.00					2	PPM	#/MG			
z. Tin, Total (7440-31-5)		х												
aa. Titanium, Total (7440-32-6)		х												

Part C – If you are a primary industry and this outfall contains process wastewater, refer to Table C-2 in the instructions to determine which of the GC/MS fractions you must test for. Mark "X" in the Testing Required column for all such GC/MS fractions that apply to your industry and for ALL toxic metals, cyanides, and total phenols. If you are not required to mark this column (secondary industries, nonprocess wastewater outfalls, and non-required GC/MS fractions), mark "X" in the Believed Present column for each pollutant you know or have reason to believe is present. Mark "X" in the Believed Absent column for each pollutant you believe to be absent. If you mark either the Testing Required or Believed Present columns for any pollutant, you must provide the result of at least one analysis for that pollutant. Note that there are seven pages to this part; please review each carefully. Complete one table (all seven pages) for each outfall. See instructions for additional details and requirements.

3. EFFLUENT 4. UNITS INTAKE (optional) MARK "X" POLLUTANT a. Long-Term Avg Value h. And CAS NO. b. Maximum 30-Day c. Long-Term Avg. Value (if available) No. of d. b. 2. Testing Believed Believed Maximum Daily Value Value (if available) No. of Concentration Mass Analyses (if available) Required (1) Concentration (2) Mass (2) Mass (2) Mass (2) Mass Present Absent Analyses Concentration Concentration Concentration METALS, CYANIDE AND TOTAL PHENOLS 1M. Antimony Total (7440-36-0) < 0.002 < 0.02 PPM #MG 2M. Arsenic, Total (7440-38-2) X < 0.002 < 0.02 PPM #MG 3M. Beryllium Total (7440-41-7) < 0.002 <0.02 PPM #MG 4M. Cadmium Total (7440-43-9) <0.002 <0.02 PPM #MG 5M. Chromium Total (7440-43-9) < 0.002 <0.02 PPM #MG 6M. Copper Total (7550-50-8) <0.002 <0.02 PPM #MG 7M. Lead Total (7439-92-1) < 0.002 < 0.02 PPM #MG 8M. Mercury Total <.002 (7439-97-6) PPM < 0.0002 #MG 9M. Nickel, Total (7440-02-0) < 0.002 <0.02 PPM #MG 10M. Selenium, Total (7782-49-2) X <0.002 <0.02 PPM #MG 11M. Silver, Total (7440-28-0) < 0.002 < 0.02 PPM #MG

Part C - Continu		2. MARK "X"				EFF	3. LUENT				4. UNITS		INTAK	5. E (options	al)
POLLUTANT And CAS NO.	a. Testing	a. Believed	b, Believed	a. Maximum Dail	y Value	b. Maximum 3 Value (if avai	0-Day	c. Long-Term Value (if avail		d. No. of	a. Concentration	b. Mass	a. Long-Term Av		b. No. of
(if available)	Required	Present	Absent	(1) Concentration	(2) Mass	(1) Concentration	(2) Mass	(1) Concentration	(2) Mass	Analyses			(1) Concentration	(2) Mass	Analyse
METALS, CYA	NIDE AND T	OTAL PHE	NOLS (Con	tinued)											
12M. Thallium, Total (7440-28-0)	х			<0.002	<0.02					2	PPM	#MG			
13M. Zinc, Total (7440-66-6)	х			<0.002	<0.02					2	PPM	#MG			
14M. Cyanide, Total (57-12-5)	x			<0.02	<0.17	-				2	PPM	#MG			
15M. Phenols, Total					<0.42							#MG			
DIOXIN	X	l		<0.05	<0.42	J	<u> </u>	<u> </u>	<u> </u>	2	PPM	#MG		İ	<u> </u>
2,3,7,8 Tetra- chlorodibenzo, P, Dioxin (1784-01-6)			x	DESCRIBE RES	ULTS:										
GC/MS FRACT	ON - VOLA	TILE COM	POUNDS					T		·		,		,	T
1V. Acrolein (107-02-8)			x												
2V. Acrylonitrile (107-13-1)			x												
3V. Benzene (71-43-2)			х												
5V. Bromoform (75-25-2) 6V. Carbon			x												<u> </u>
Tetrachloride (56-23-5)			х								-				
7V. Chloro- benzene (108-90-7)			x												
8V. Chlorodibro- momethane															
(124-48-1)			X	[	1	1	1	1	1	1				1	

Part C - Continu	ıed						13.3					Carlor.			
1.		2. MARK "X"				EFF	3. LUENT				4. UNITS		INTAK	5. E (option:	al)
POLLUTANT And CAS NO.	a. Testing	a. Believed	b. Believed	a. Maximum Dail	y Value	b. Maximum 3 Value (if avai		c. Long-Term Value (if avai		d. No. of	a. Concentration	b. Mass	a. Long-Term Av		b. No. of Analyses
(if available)	Required	Present	Absent	(1) Concentration	(2) Mass	(1) Concentration	(2) Mass	(1) Concentration	(2) Mass	Analyses			(1) Concentration	(2) Mass	1970 1970 (1770)
9V. Chloroethane (74-00-3)			x										Concentration	111103	
10V. 2-Chloro- ethylvinyl Ether (110-75-8)			X												
11V. Chloroform (67-66-3)			х												
12V. Dichloro- bromomethane				***************************************											
(75-71-8) 14V. 1,1- Dichloroethane			X	<b>4</b> 300											
(75-34-3) 15V. 1,2- Dichloroethane			X												
(107-06-2) 16V. 1,1-			X												
Dichlorethylene (75-35-4) 17V. 1,2-Di-			х												
chloropropane (78-87-5)			x												
18V. 1,3- Dichloropro- pylene (452-75-6)			х												
19V. Ethyl- benzene (100-41-4)			X	-											
20V. Methyl Bromide (74-83-9)			X												

ı.		2. MARK "X"				EFI	3. LUENT				4. UNITS		INTAK	5. E (options	ıl)
POLLUTANT And CAS NO.	a. Testing	a. Believed	b. Believed	a. Maximum Daily	y Value	b. Maximum 3 Value (if avai		c. Long-Term Value (if avai		d. No. of	a. Concentration	b. Mass	a. Long-Term Av	g. Value	b. No. of Analyses
(if available)	Required	Present	Absent	(1) Concentration	(2) Mass	(1) Concentration	(2) Mass	(1) Concentration	(2) Mass	Analyses			(1) Concentration	(2) Mass	
21V. Methyl Chloride (74-87-3)			х												
22V. Methylene Chloride (75-00-2)			x												
23V. 1,1,2,2- Tetrachloro- ethane (79-34-5)			x												
24V. Tetrachloro- ethylene (127-18-4)			x												
25V. Toluene (108-88-3)			x								-			٠	
26V. 1,2-Trans- Dichloro- ethylene (156-60-5)			x												
27V. 1,1,1-Tri- chloroethane (71-55-6)			Х												
28V. 1,1,2-Tri- chloroethane (79-00-5)			x												
29V. Trichloro- ethylene (79-01-6)			х												
30V. Vinyl Chloride (75-01-4)			X												

Part C - Continu	ed													48.34	
1.	1	2. MARK "X"				EFF	3. LUENT				4. UNITS		INTAK	5. E (option:	al)
POLLUTANT And CAS NO.	a. Testing	a. Believed	b. Believed	a. Maximum Daily	y Value	b. Maximum 3 Value (if avai		c. Long-Term Value (if avail	Avg.	d. No. of	a. Concentration	b. Mass	a. Long-Term Av		b. No. of Analyses
(if available)	Required	Present	Absent	(1) Concentration	(2) Mass	(1) Concentration	(2) Mass	(1) Concentration	(2) Mass	Analyses			(1) Concentration	(2) Mass	
GC/MS FRACTI	ON - ACID	COMPOUN	DS												
1A. 2-Chloro- phenol (95-57-8)			x												
2A. 2,4- Dichlor- Orophenol			x												
(120-83-2)			Α												ļ
3A. 2,4-Dimeth- ylphenol (105-67-9)			x												
4A. 4,6-Dinitro- o-cresol											1/1				
(534-52-1) 5A. 2,4-Dinitro- phenol			X												
(51-28-5) 6A. 2-Nitro-	:		X												-
phenol (88-75-5)			х												
7A. 4-Nitro- phenol (100-02-7)			x					-							
8A. P-chloro-m- cresol													-		
(59-50-7) 9A. Pentachloro- phenol			X												
(87-88-5)							<u> </u>			-					
10A. Phenol (108-05-2)			x												
11A. 2,4,6-Tri- chlorophenol (88-06-2)			x												
GC/MS FRACT	ON - BASE/	NEUTRAL	COMPOUN	DS			,						,		
1B. Acena- phthene (83-32-9)			х												

Part C - Continu	ied														
1.		2. MARK "X"				EFF	3. LUENT				4. UNITS		INTAK	5. E (optiona	al)
POLLUTANT And CAS NO.	a. Testing	a. Believed	b. Believed	a. Maximum Daily	/ Value	b. Maximum 3 Value (if avai		c. Long-Term Value (if avail		d. No. of	a. Concentration	b. Mass	a. Long-Term Av	g Value	b. No. of Analyses
(if available)	Required	Present	Absent	(1) Concentration	(2) Mass	(1) Concentration	(2) Mass	(1) Concentration	(2) Mass	Analyses			(1) Concentration	(2) Mass	
GC/MS FRACTI	ON - BASE/	NEUTRAL	COMPOUN	DS (Continued)						<u> </u>					
2B. Acena- phtylene (208-96-8)			X												
3B. Anthra- cene (120-12-7)			x											,	
4B. Benzidine (92-87-5)			х												
5B. Benzo(a)- anthracene (56-55-3)			x												
6B. Benzo(a)- pyrene (50-32-8)			x	·											
7B. 3,4-Benzo- fluoranthene (205-99-2)			X												
8B. Benzo(ghl) perylene (191-24-2)			х												
9B. Benzo(k)- fluoranthene (207-08-9)			х										-		
10B. Bis(2- chlor- oethoxy)- methane (111-91-1)	,		x												
11B. Bis (2-chlor- oisopropyl)- Ether			x										·		
12B. Bis (2-ethyl- hexyl)- phthalate (117-81-7)			х												

Part C - Continu	ied														
1.		2. MARK "X"				EFF	3. LUENT				4. UNITS		INTAK	5. E (optiona	al)
POLLUTANT And CAS NO.	a. Testing	a. Believed	b. Believed	a. Maximum Daily	v Value	b. Maximum 3 Value (if avai	0-Day	c. Long-Term Value (if avail	Avg.	d. No. of	a. Concentration	b. Mass	a. Long-Term Av		b. No. of Analyses
(if available)	Required	Present	Absent	(1) Concentration	(2) Mass	(1) Concentration	(2) Mass	(1) Concentration	(2) Mass	Analyses			(1) Concentration	(2) Mass	
GC/MS FRACT	ION - BASE/	NEUTRAL	COMPOUN	DS (Continued)		-									
13B. 4-Bromo- phenyl Phenyl ether (101-55-3)			x												
14B. Butyl- benzyl phthalate (85-68-7)			x												
15B. 2-Chloro- naphthalene (7005-72-3)			X												
16B. 4-Chloro- phenyl phenyl ether (7005-72-3)			x												
17B. Chrysene (218-01-9)			X												
18B. Dibenzo- (a,h) Anthracene (53-70-3)			x								-				
19B. 1,2- Dichloro- benzene (95-50-1)			x											·	
20B. 1,3- Dichloro- Benzene (541-73-1)			x												
21B. 1,4- Dichloro- benzene (106-46-7)			x												
22B. 3,3- Dichloro- benzidene (91-94-1)			x	-											
23B. Diethyl Phthalate (84-66-2)			x												

Part C - Continu	ed								1 84(1)						
ı.		2. MARK "X"				EFF	3. LUENT				4. UNITS		INTAK	5. E (option:	al)
POLLUTANT And CAS NO.	a. Testing	a. Believed	b. Believed	a. Maximum Daily	/ Value	b. Maximum 3 Value (if avai	0-Day	e. Long-Term Value (if avai	Avg.	d. No. of	a. Concentration	b. Mass	a. Long-Term Av		b. No. of Analyses
(if available)	Required	Present	Absent	(1) Concentration	(2) Mass	(1) Concentration	(2) Mass	(1) Concentration	(2) Mass	Analyses			(1) Concentration	(2) Mass	
GC/MS FRACT	ON - BASE/	NEUTRAL	COMPOUN		1121100	1 Concentration	1	1 Contentiation	1.2000	<u>laininidi ara</u>			1	1	
24B. Dimethyl					1				T						
Phthalate														Ì	1
(131-11-3)			X												
25B. Di-N-										1				}	1
butyi Phthalate															ļ
(84-74-2)			X			ļ			ļ	<b> </b>					ļ
26B.					ł		ł					1			
2,4-Dinitro-			7/				1		1	ľ					į.
toluene (121-14-2)			X			1			l						
27B.					<b></b>		<b></b>		<del> </del>	<del> </del>					
2,6-Dinitro-			:				-		1				1		
toluene	1		x		1										
(606-20-2)		İ								İ					1
28B. Di-n-octyl				<del></del>											
Phthalate					l	1		1.		1					1
(117-84-0)			X		L		1								
29B. 1,2-							İ		1.	İ		l			1
diphenyl-							]			1					
hydrazine (as			X					1		1					
azonbenzene) (122-66-7)							į			ŀ		ĺ			1
(122-00-7) 30B.	<del></del>		<del> </del>				<del> </del>	-	<del> </del>	<del> </del>			<del> </del>	-	<del> </del>
Fluoranthene							j								
(208-44-0)			x		1	•	1			]					1
(200 (1.0)							1		1	1					
31B. Fluorene	l		1		1				ł				-	1	1
(86-73-7)			X					1							<u> </u>
32B.							1		[	İ					
Hexachloro-	l	1	}		l		1		1						1
benzene			X		1										
(118-71-1)					ļ		ļ			ļ			<b></b>		<del> </del>
33B.		}	İ		ļ							i		1	1
Hexachloro- butadiene		1	x		1		1								
(87-68-3)	1	1	^									Ī			1
34B.	<del>                                     </del>	<del> </del>	···		-	<del> </del>	<del>                                     </del>	<del>                                     </del>	<del>                                     </del>	<b>†</b>					-
Hexachloro-	1				1		1		1			I			
cyclopenta-	1	1	X		1					-		İ		1	
diene	1	1			1				1	1				1	
(77-47-4)	L					1				<u> </u>					

Part C - Continu	ied									30 J. J. 18.					
1.		2. MARK "X"				EFF	3. LUENT				4. UNITS			5. E (optiona	
POLLUTANT And CAS NO.	a. Testing	a. Believed	b. Believed	a. Maximum Daily	Value	b. Maximum 3 Value (if avai		c. Long-Term Value (if avail		d. No. of	a. Concentration	b. Mass	a. Long-Term Av	g Value	b. No. of Analyses
(if available)	Required	Present	Absent	(1) Concentration	(2) Mass	(1) Concentration	(2) Mass	(1) Concentration	(2) Mass	Analyses			(1) Concentration	(2) Mass	12111113565
GC/MS FRACTI	ON - BASE/	NEUTRAL	COMPOUN	DS (Continued)						-					
35B. Hexachlo- roethane															
(67-72-1) 36B. Indneo-			X							ļ					
(1,2,3-oc)- Pyrene (193-39-5)			x												
37B. Isophorone															
(78-59-1)		•	X			]	İ								
38B.															
Napthalene					1										!
(91-20-3)			X												
39B.							İ								
Nitro- benzene (98-95-3)			х												
40B. N-Nitroso- dimethyl- amine (62-75-9)			x												
41B. N-nitrosodi-n- propylamine (621-64-7)			x												
42B. N-nitro- sodiphenyl- amine (86-30-6)			x												
43B. Phenan- threne (85-01-8)			х												
44B. Pyrene (129-00-0)			X												
45B. 1,2,4 Tri- chloro- benzene (120-82-1)			х												

Part C - Continu	ıed			<u> </u>			98050					75.4750		1100000	
1.	1	2. MARK "X"				EFF	3. LUENT				4. UNITS		INTAK	5. E (optiona	ıl)
POLLUTANT And CAS NO.	a. Testing	a. Believed	b. Believed	a. Maximum Dail	y Value	b. Maximum 3 Value (if avai		c. Long-Term Value (if avai		d. No. of	a. Concentration	b. Mass	a. Long-Term Av	g. Value	b. No. of Analyses
(if available)  GC/MS FRACT	Required	Present	Absent	(1) Concentration	(2) Mass	(1) Concentration	(2) Mass	(1) Concentration	(2) Mass	Analyses			(1) Concentration	(2) Mass	
GC/MS FRACT	UN-FEST	CIDES			Γ	T		T	Γ		<u> </u>	·	T		Γ
1P. Aldrin (309-00-2)			X												
2P. α-BHC (319-84-6)			X												
3P. β-BHC (58-89-9)			х												
4P. gamma-BHC (58-89-9)			x								:				
5P. δ-BHC (319-86-8)			х												
6P. Chlordane (57-74-9)			X												
7P. 4,4'-DDT (50-29-3)			X												
8P. 4,4'-DDE (72-55-9)			X												
9P. 4,4'-DDD (72-54-8)			X					·							
10P. Dieldrin (60-57-1)			x												
11P. α- Endosulfan (115-29-7)			X												
12P. β- Endosulfan (115-29-7)			X												
13P. Endosulfan Sulfate (1031-07-8)			X												-
14P. Endrin (72-20-8)			X												

1.		2. MARK "X"				EFI	3. LUENT				4. UNITS		INTAK	5. E (options	վ)
POLLUTANT And CAS NO.	a. Testing	a. Believed	b. Believed	a. Maximum Daily	Value	b. Maximum 3 Value (if avai		c. Long-Term Value (if avai		d. No. of	a. Concentration	b. Mass	a. Long-Term Av		b. No. of Analyses
(if available)	Required	Present	Absent	(1) Concentration	(2) Mass	(1) Concentration	(2) Mass	(1) Concentration	(2) Mass	Analyses			(1) Concentration	(2) Mass	
GC/MS FRACT	ON - PESTI	CIDES			·		- Hairing and American and Amer	All the second s				<u> </u>	4	L	
15P. Endrin Aldehyde (7421-93-4)			х												
16P Heptachlor (76-44-8)			x					-							
17P. Heptaclor Epoxide (1024-57-3)			X												
18P. PCB-1242 (53469-21-9)			X												
19P. PCB-1254 (11097-69-1)			Х												
20P. PCB-1221 (11104-28-2)			X			·							·		
21P. PCB-1232 (11141-16-5)			x												
22P. PCB-1248 (12672-29-6)			х												
23P. PCB-1260 (11096-82-5)			x												
24P. PCB-1016 (12674-11-2)			x												
25P. Toxaphene (8001-35-2)			х												

PLEASE PRINT OR TYPE IN THE UNSHADED AREAS ONLY. You may report some or all of this information on separate sheets (use the same format) instead of completing these pages. (See instructions)

		Supplied States	FICS (Continued fr							OUTFALL NO.	108	
Part A – You must	provide the resul	ts of at least one	analysis for every p	ollutant in this ta 2. EFFLUENT	ble. Complete one tabl	e for each outfa	II. See instructions	for additional detail 3. UNI (specify if	TS		. INTAKE (optional)	
1. POLLUTANT	a. Maximum	Daily Value	b. Maximum 3 (if avai		c. Long-Term A (if availal		d. No. of	a. Concentration	b. Mass	a. Long-Term		b.
	(1) Concentration	(2) Mass	(1) Concentration	(2) Mass	(1) Concentration	(2) Mass	Analyses			(1) Concentration	(2) Mass	No of Analyses
a. Biochemical Oxygen Demand (BOD)												
b. Chemical Oxygen Demand (COD)												
c. Total Organic Carbon (TOC)												
d. Total Suspended Solids (TSS)	3:	3 275.55	N/A	N/A	N/A	N/A	2	PPM	LBS/MG			
e. Ammonia (as N)												
f. Flow (in units of MGD)	VALUE	0.004	VALUE		VALUE		2		MGD	VALUE		
g. Temperature (winter)	VALUE	34°F	VALUE		VALUE				°c	VALUE	* . · · · · · · · · · · · · · · · · · ·	
h. Temperature (summer)	VALUE	73 ° F	VALUE		VALUE				°c	VALUE		
i. pH	MINIMUM 7.58	MAXIMUM 8.31	MINIMUM	MAXIMUM			2	STANI	DARD UNITS			

Part B - In the MARK "X" column, place an "X" in the <u>Believed Present</u> column for each pollutant you know or have reason to believe is present. Place an "X" in the <u>Believed Absent</u> column for each pollutant you believe to be absent. If you mark the <u>Believed Present</u> column for any pollutant, you must provide the results of at least one analysis for that pollutant. Complete one table for each outfall. See the instructions for additional details and requirements.

1. POLLUTANT		!. K "X"			EF	3. FLUENT				4. UNITS		INTAI	6. Œ (optior	ol)
AND CAS NO.	a.	b.	a. Maximum Da	ily Value	b. Maximum 3 Value (if avai	0-Day	c. Long-Terr Value (if ava		d. No. of	a.	b.	a. Long-Tern Value		b. No. of
(if available)	Believed Present	Believed Absent	(1) Concentration	(2) Mass	(1) Concentration	(2) Mass	(1) Concentration	(2) Mass	Analyses	Concentration	Mass	(1) Concentration	(2) Mass	Analyses
a. Bromide (24959-67-9)		Х												
b. Bromine Total Residual		X												
c. Chloride		Х												
d. Chlorine, Total Residual		X												
e. Color		x												
f. Fecal Coliform		х												
g. Fluoride (16984-48-8)		х												
h. Hardness (as CaCO <sub>3</sub> )	Х		80	668					2	PPM	#/MG			
i. Nitrate – Nitrite (as N)	A	х	80	008						PPM	#/IVICI			· ·
j. Nitrogen, Total Organic								-						
(as N) k. Oil and		X												
Grease  1. Phosphorous (as P), Total 7723-14-0		X												
m. Radioactivity						l	<u> </u>	<u> </u>	<u></u>			<u> </u>		
(1) Alpha, Total		х												
(2) Beta, Total		X												
(3) Radium Total		X												
(4) Radium, 226, Total		X												

Part B - Continu 1. POLLUTANT		2. K "X"			EF	3. FLUENT				4. UNITS		INTAR	5. Œ (option	ah
And CAS NO.	a.	<b>b.</b>	a. Maximum Dail	y Value	b. Maximum 3 Value (if avai	0-Day	c. Long-Terr Value (if ava		d. No. of	a.	b.	a. Long-Term Avg		b. No. of
(if available)	Believed Present	Believed Absent	(1) Concentration	(2) Mass	(1) Concentration	(2) Mass	(1) Concentration	(2) Mass	Analyses	Concentration	Mass	(1) Concentration	(2) Mass	Analyses
n. Sulfate (as SO <sub>4</sub> ) (14808-79-8)	х		300	2505					2	PPM	#/MG	Concentration	A724135	
o. Sulfide (as S)		Х												
p. Sulfite (as SO <sub>4</sub> ) (14286-46-3)		х												
q. Surfactants		x												
r. Aluminum, Total (7429-90)		х												1
s. Barium, Total (7440-39-3)		х												
t. Boron, Total (7440-42-8)		х												
<ul><li>u. Cobalt, Total (7440-48-4)</li></ul>		х												
v. Iron, Total (7439-89-6)	х		0.07	0.58					2	PPM	#/MG			
w. Magnesium Total (7439-96-4)		х							-					
x. Molybdenum Total (7439-98-7)		х												
y. Manganese, Total (7439-96-6)	х		0.3	2.50					2	PPM	#/MG			
z. Tin, Total (7440-31-5)		х												
aa. Titanium, Total (7440-32-6)		х												

Part C – If you are a primary industry and this outfall contains process wastewater, refer to Table C-2 in the instructions to determine which of the GC/MS fractions you must test for. Mark "X" in the Testing Required column for all such GC/MS fractions that apply to your industry and for ALL toxic metals, cyanides, and total phenols. If you are not required to mark this column (secondary industries, nonprocess wastewater outfalls, and non-required GC/MS fractions), mark "X" in the Believed Present column for each pollutant you know or have reason to believe is present. Mark "X: in the Believed Absent column for each pollutant you believe to be absent. If you mark either the Testing Required or Believed Present columns for any pollutant, you must provide the result of at least one analysis for that pollutant. Note that there are seven pages to this part; please review each carefully. Complete one table (all seven pages) for each outfall. See instructions for additional details and requirements.

1.		2. MARK "X"					3. LUENT				4. UNITS		INTAK	5. E (optiona	
POLLUTANT And CAS NO.	a. Testing	a. Believed	b. Believed	a. Maximum Daily	/ Value	b. Maximum 3 Value (if avai		c. Long-Term Value (if avai		d. No. of	a. Concentration	b. Mass	a. Long-Term Av	g Value	b. No. of Analyses
(if available)	Required	Present	Absent	(1) Concentration	(2) Mass	(1)	(2) Mass	(1) Concentration	(2) Mass	Analyses			(1) Concentration	(2) Mass	
METALS, CYA	VIDE AND T	OTAL PHE	NOLS												
1M. Antimony Total (7440-36-0)	x			<0.002	<0.02					2	PPM	#MG			
2M. Arsenic, Total (7440-38-2)	x			<0.002	<0.02					2	PPM	#MG			
3M. Beryllium Total (7440-41-7)	x			<0.002	<0.02					2	PPM	#MG			
4M. Cadmium Total (7440-43-9)	x			<0.002	<0.02					2	PPM	#MG			
5M. Chromium Total (7440-43-9)	x			<0.002	<0.02					2	PPM	#MG			
6M. Copper Total (7550-50-8)	x			<0.002	<0.02					2	PPM	#MG			
7M. Lead Total (7439-92-1)	x			<0.002	<0.02			,		2	PPM	#MG			
8M. Mercury Total (7439-97-6)	x			<0.0002	<.002					2	PPM	#MG			
9M. Nickel, Total (7440-02-0)	x			<0.002	<0.02					2	PPM	#MG			
10M. Selenium, Total (7782-49-2)	x			<0.002	<0.02					2	PPM	#MG			
11M. Silver, Total (7440-28-0)	x			<0.002	<0.02					2	PPM	#MG			

Part C - Continu		2.					3.				4. UNITS		INTAK	5. E (option:	al)
1. POLLUTANT And CAS NO.	a. Testing	MARK "X" a. Believed	b. Believed	a. Maximum Daily	Value	b. Maximum 3 Value (if avai		c. Long-Term Value (if avail		d. No. of	a. Concentration	b. Mass	a. Long-Term Av	g Value	b. No. of
(if available)	Required	Present	Absent	(1) Concentration	(2) Mass	(1) Concentration	(2) Mass	(1) Concentration	(2) Mass	Analyses			(1) Concentration	(2) Mass	Analyses
METALS, CYAN	VIDE AND T	OTAL PHE	NOLS (Con	tinued)							1				т
12M. Thallium, Total (7440-28-0)	X			<0.002	<0.02					2	PPM	#MG			
13M. Zinc, Total (7440-66-6)	X			<0.002	<0.02					2	PPM	#MG			
14M. Cyanide, Total (57-12-5)	x			<0.02	<0.17					2	PPM	#MG			
15M. Phenols, Total	x			<0.05	<0.42					2	PPM	#MG			
DIOXIN		4													
2,3,7,8 Tetra- chlorodibenzo, P, Dioxin (1784-01-6)			х	DESCRIBE RES	ULIS:										
GC/MS FRACT	ION – VOLA	TILE COM	POUNDS	<del></del>		7	Т	T	Т	T		T	1		T
1V. Acrolein (107-02-8)			x												
2V. Acrylonitrile (107-13-1)			x												
3V. Benzene (71-43-2)			x												<u> </u>
5V. Bromoform (75-25-2) 6V. Carbon			x				-		-						
Tetrachloride (56-23-5)			x				-								
7V. Chloro- benzene (108-90-7)			x	_											
8V. Chlorodibro- momethane (124-48-1)			X												

Part C - Continu		2. MARK "X"				EFF	3. LUENT				4. UNITS			5. E (options	
POLLUTANT And CAS NO.	a. Testing	a. Believed	b. Believed	a. Maximum Daily	Value	b. Maximum 3 Value (if avai	0-Day	c. Long-Term Value (if avail		d. No. of	a. Concentration	b. Mass	a. Long-Term Av	g Value	b. No. of Analyses
(if available)	Required	Present	Absent	(1) Concentration	(2) Mass	(1) Concentration	(2) Mass	(1) Concentration	(2) Mass	Analyses			(1) Concentration	(2) Mass	
9V. Chloroethane (74-00-3)			x												
10V. 2-Chloro- ethylvinyl Ether (110-75-8)			x												
11V. Chloroform (67-66-3)			X												
12V. Dichloro- bromomethane (75-71-8)			X												
14V. 1,1- Dichloroethane (75-34-3)			x												
15V. 1,2- Dichloroethane (107-06-2)			x												
16V. 1,1- Dichlorethylene (75-35-4)			x												
17V. 1,2-Di- chloropropane (78-87-5)			x												
18V. 1,3- Dichloropro- pylene			x												
(452-75-6) 19V. Ethyl- benzene			v												
(100-41-4) 20V. Methyl Bromide (74-83-9)			X												

Part C - Continu	ea	2.					3.				4.			5.	
1.	1	MARK "X"				EFF	LUENT				UNITS			E (options	d) b.
POLLUTANT And CAS NO.	a. Testing	a. Believed	b. Believed	a. Maximum Daily	Value	b. Maximum 3 Value (if avai		c. Long-Term Value (if avail		d. No. of	a. Concentration	b. Mass	a. Long-Term Avg		No. of Analyses
(if available)	Required	Present	Absent	(1) Concentration	(2) Mass	(1) Concentration	(2) Mass	(1) Concentration	(2) Mass	Analyses			(1) Concentration	(2) Mass	
21V. Methyl Chloride (74-87-3)			X												
22V. Methylene Chloride (75-00-2)			X												
23V. 1,1,2,2- Tetrachloro- ethane (79-34-5)			x												
24V. Tetrachloro- ethylene (127-18-4)			x												
25V. Toluene (108-88-3)			X												
26V. 1,2-Trans- Dichloro- ethylene (156-60-5)			x												
27V. 1,1,1-Tri- chloroethane (71-55-6)			X												
28V. 1,1,2-Tri- chloroethane (79-00-5)			x												
29V. Trichloro- ethylene (79-01-6)			х												<u> </u>
30V. Vinyl Chloride (75-01-4)			x				1								<u></u>

Part C - Continu	ed	2.					3.				4.			5.	
1.	1	MARK "X"				EFF	LUENT				UNITS			E (option	
POLLUTANT And CAS NO.	a. Testing	a. Believed	b. Believed	a. Maximum Daily	Valne	b. Maximum 3 Value (if avai		c. Long-Term Value (if avail		d. No. of	a. Concentration	b. Mass	a. Long-Term Av	g Value	b. No. of Analyses
(if available)	Required	Present	Absent	(1) Concentration	(2) Mass	(1) Concentration	(2) Mass	(1) Concentration	(2) Mass	Analyses			(1) Concentration	(2) Mass	
GC/MS FRACTI	ON - ACID	COMPOUN	DS											T	<del>,                                      </del>
1A. 2-Chloro- phenol															
(95-57-8)			X												<del> </del>
2A. 2,4- Dichlor- Orophenol (120-83-2)			x												
3A. 2,4-Dimeth- ylphenol			x					-			,				
(105-67-9) 4A. 4,6-Dinitro-															
o-cresol (534-52-1)			X												-
5A. 2,4-Dinitro- phenol (51-28-5)			x												
6A. 2-Nitro- phenol															
(88-75-5)			X					<u> </u>	<b>_</b>	<del> </del>				<del> </del>	-
7A. 4-Nitro- phenol (100-02-7)			x												-
8A. P-chloro-m- cresol															
(59-50-7)			X				ļ				ļ			<del> </del>	+
9A. Pentachloro- phenol (87-88-5)			x												
10A. Phenol															
(108-05-2)			x		1							ļ	ļ	<b>_</b>	
11A. 2,4,6-Tri- chlorophenol (88-06-2)			x												
GC/MS FRACT	ION – BASE	/NEUTRAL		NDS									<del></del>	<del></del>	7
1B. Acena- phthene (83-32-9)			x												

Part C - Continu		2.					3.				4.		TN/TA-12	5. E (options	
1.		MARK "X"				EFF	LUENT				UNITS		INTAK a.	r (options	b.
POLLUTANT And CAS NO.	a. Testing	a. Believed	b. Believed	a. Maximum Daily	Value	b. Maximum 3 Value (if avai	0-Day lable)	c. Long-Term Value (if avail		d. No. of	a. Concentration	b. Mass	Long-Term Av	g Value	No. of Analyses
(if available)	Required	Present	Absent	(1) Concentration	(2) Mass	(1) Concentration	(2) Mass	(1) Concentration	(2) Mass	Analyses			(1) Concentration	(2) Mass	
GC/MS FRACTI	ON - BASE/	NEUTRAL	COMPOUN	DS (Continued)					,	,					T
2B. Acena- phtylene (208-96-8)			X												
3B. Anthra- cene (120-12-7)			x												
4B. Benzidine (92-87-5)			x												
5B. Benzo(a)- anthracene (56-55-3)			x												
6B. Benzo(a)- pyrene (50-32-8)			x								-				
7B. 3,4-Benzo- fluoranthene (205-99-2)			X												
8B. Benzo(ghl) perylene (191-24-2)			x												
9B. Benzo(k)- fluoranthene (207-08-9)			x												
10B. Bis(2- chlor- oethoxy)- methane (111-91-1)			x												
11B. Bis (2-chlor- oisopropyl)- Ether			x												
12B. Bis (2-ethyl- hexyl)- phthalate (117-81-7)			x												

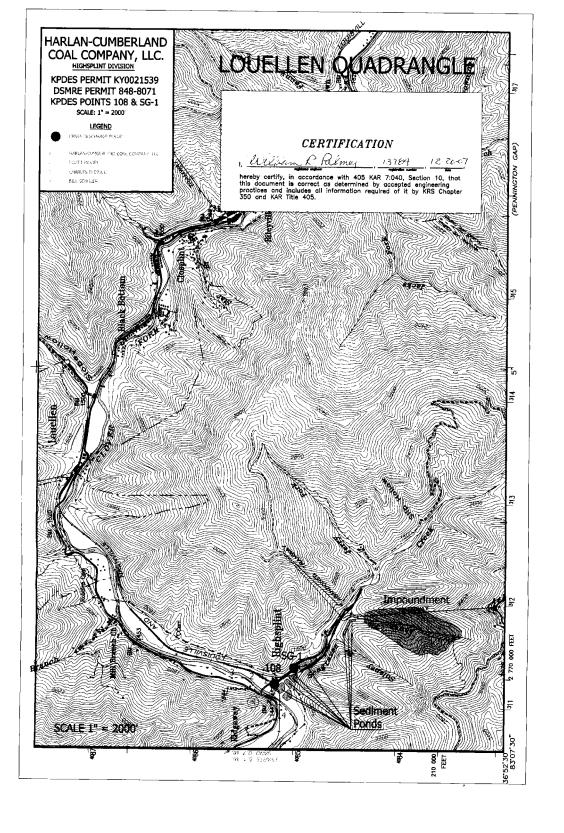
Part C - Continu	ed						3.				4.			5.	
1.		2. MARK "X"				EFF	J. LUENT				UNITS		INTAK	o. E (options	
POLLUTANT And CAS NO.	a. Testing	a. Believed	b. Believed	a. Maximum Daily	. Value	b. Maximum 3 Value (if avai		c. Long-Term Value (if avail		d. No. of	a. Concentration	b. Mass	a. Long-Term Av	g Value	b. No. of Analyses
(if available)	Required	Present	Absent	(1) Concentration	(2) Mass	(1) Concentration	(2) Mass	(1) Concentration	(2) Mass	Analyses			(1) Concentration	(2) Mass	
GC/MS FRACTI	ON - BASE/	NEUTRAL	COMPOUN	DS (Continued)	L										
13B. 4-Bromo- phenyl Phenyl ether (101-55-3)			x												
14B. Butyl- benzyl phthalate (85-68-7)			x								-				
15B. 2-Chloro- naphthalene (7005-72-3) 16B. 4-Chloro-			х							-					
phenyl phenyl ether (7005-72-3)			x												
17B. Chrysene (218-01-9)			х												
18B. Dibenzo- (a,h) Anthracene (53-70-3)			x												
19B. 1,2- Dichloro- benzene (95-50-1)			x												
20B. 1,3- Dichloro- Benzene (541-73-1)			х												
21B. 1,4- Dichloro- benzene (106-46-7)			x												
22B. 3,3- Dichloro- benzidene (91-94-1)			x												
23B. Diethyl Phthalate (84-66-2)			X												

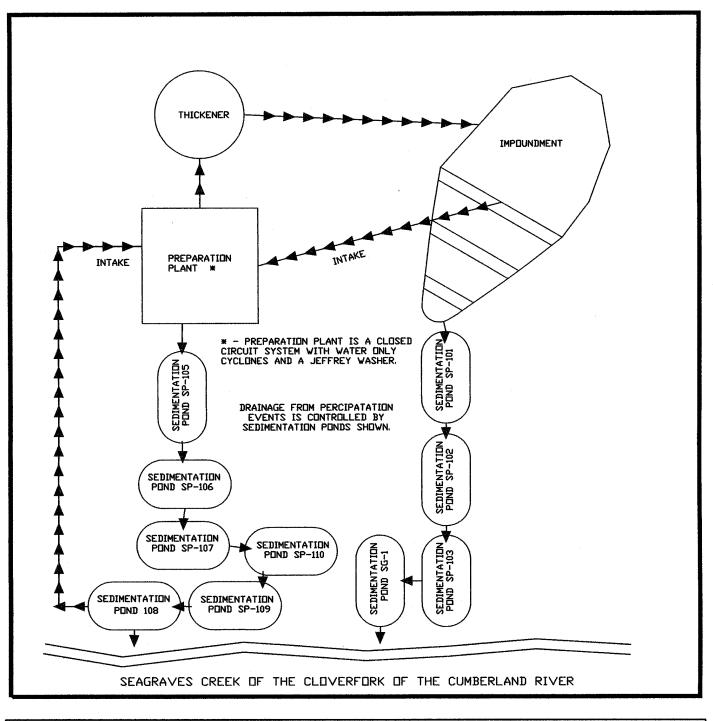
Part C - Continu	ed										4.			5.	
1.	1	2. MARK "X"					3. LUENT				UNITS			o. E (options	
POLLUTANT And CAS NO.	a. Testing	a. Believed	b. Believed	a. Maximum Daily	/ Value	b. Maximum 3 Value (if avai		c. Long-Term Value (if avai	Avg. lable)	d. No. of	a. Concentration	b. Mass	a. Long-Term Avı	g. Value	b. No. of Analyses
(if available)	Required	Present	Absent	(1) Concentration	(2) Mass	(1) Concentration	(2) Mass	(1) Concentration	(2) Mass	Analyses			(1) Concentration	(2) Mass	
GC/MS FRACT	ON - BASE/	NEUTRAL	COMPOUN							·					
24B. Dimethyl Phthalate															
(131-11-3)		ļ	X				ļ		<b></b>	<b>-</b>			<u> </u>		
25B. Di-N- butyl Phthalate (84-74-2)			x												
26B.			11				· · · · · · · · · · · · · · · · · · ·		<u> </u>						
2,4-Dinitro- toluene			x	*											
(121-14-2) 27B.						<del> </del>	<del> </del>			-					<del> </del>
2,6-Dinitro- toluene			x												
(606-20-2)	1		^	<u> </u>											
28B. Di-n-octyl															
Phthalate (117-84-0)		1	x			•									
29B. 1,2-															
diphenyl- hydrazine (as azonbenzene) (122-66-7)			x												
30B. Fluoranthene															
(208-44-0)		ļ	X				ļ		<del> </del>	<u> </u>					<del>                                     </del>
31B. Fluorene (86-73-7)			x												
32B.															
Hexachloro- benzene (118-71-1)			x												
33B.					<u> </u>				1						
Hexachloro- butadiene (87-68-3)			x					E-control of the cont							
34B. Hexachloro- cyclopenta- diene			x												
(77-47-4)			ļ.,,,,			<u></u>	<u> </u>		<u> </u>					<u> </u>	

Part C - Continu	ed														
ı.		2. MARK "X"				EFI	3. LUENT				4. UNITS		INTAK	5. E (option:	ai)
POLLUTANT And CAS NO.	a. Testing	a. Believed	b. Believed	a. Maximum Daily	/ Value	b. Maximum 3 Value (if avai		c. Long-Term Value (if avail		d. No. of	a. Concentration	b. Mass	a. Long-Term Av	g Value	b. No. of Analyses
(if available)	Required	Present	Absent	(1) Concentration	(2) Mass	(1) Concentration	(2) Mass	(1) Concentration	(2) Mass	Analyses			(1) Concentration	(2) Mass	
GC/MS FRACT	ON - BASE/	NEUTRAL	COMPOUN												
35B. Hexachlo- roethane (67-72-1)			х												
36B. Indneo- (1,2,3-oc)- Pyrene			x												
(193-39-5) 37B. Isophorone															
(78-59-1) 38B.		-	X						ļ						<del> </del>
Napthalene (91-20-3)			X												<u> </u>
39B. Nitro- benzene			x	,											
(98-95-3) 40B. N-Nitroso- dimethyl-															
amine (62-75-9)			X				ļ								
A1B. N-nitrosodi-n- propylamine (621-64-7)			x										-		
42B. N-nitro- sodiphenyl- amine (86-30-6)			x												
43B. Phenan- threne (85-01-8)			X												
44B. Pyrene (129-00-0)			X												
45B. 1,2,4 Tri- chloro- benzene (120-82-1)			x												

Part C - Continu	ied		- 14 <u>17 14 14</u>				Name of		A. 1.			artine ii.			
1,		2. MARK "X"				EFF	3. LUENT				4. UNITS			5. E (option:	al)
POLLUTANT And CAS NO.	a. Testing	a. Believed	b. Believed	a. Maximum Daily	v Value	b. Maximum 3 Value (if avai		c. Long-Term Value (if avail		d. No. of	a. Concentration	b. Mass	a. Long-Term Av	g. Value	b. No. of Analyses
(if available)	Required	Present	Absent	(1) Concentration	(2) Mass	(1) Concentration	(2) Mass	(1) Concentration	(2) Mass	Analyses			(1) Concentration	(2) Mass	
GC/MS FRACT	ION – PESTI	CIDES				<del>,</del>	· · · · · · · · · · · · · · · · · · ·	T					r		,
1P. Aldrin (309-00-2)			х												
2P. α-BHC (319-84-6)			x												
3P. β-BHC (58-89-9)			х												
4P. gamma-BHC (58-89-9)			x												
5P. 8-BHC (319-86-8)			x												
6P. Chlordane (57-74-9)			X												
7P. 4,4'-DDT (50-29-3)			X												
8P. 4,4'-DDE (72-55-9)			X												
9P. 4,4'-DDD (72-54-8)			x												
10P. Dieldrin (60-57-1)			x												
11P. α- Endosulfan (115-29-7)			x												
12P. β- Endosulfan (115-29-7)			x												
13P. Endosulfan Sulfate (1031-07-8)			x												
14P. Endrin (72-20-8)			x												

Part C – Continu		2. MARK "X"				EFF	3. LUENT				4. UNITS		INTAK	5. E (options	ıl)
POLLUTANT And CAS NO.	a. Testing	a. Believed	b. Believed	a. Maximum Daily	Value	b. Maximum 3 Value (if avai		c. Long-Term Value (if avai		d. No. of	a. Concentration	b. Mass	a. Long-Term Av	g Value	b. No. of Analyses
(if available)	Required	Present	Absent	(1) Concentration	(2) Mass	(1) Concentration	(2) Mass	(1) Concentration	(2) Mass	Analyses			(1) Concentration	(2) Mass	
GC/MS FRACT	ION - PESTI	CIDES													,
15P. Endrin Aldehyde (7421-93-4)			x												
16P Heptachlor			v												
(76-44-8) 17P. Heptaclor Epoxide			X												
(1024-57-3)			X				ļ		ļ						ļ
18P. PCB-1242 (53469-21-9)			x	,											
19P. PCB-1254 (11097-69-1)			х												
20P. PCB-1221 (11104-28-2)			X												
21P. PCB-1232			X												
(11141-16-5) 22P. PCB-1248															
(12672-29-6) 23P. PCB-1260			X												
(11096-82-5)		ļ	X		ļ		ļ		ļ						<del> </del>
24P. PCB-1016 (12674-11-2)			х												
25P. Toxaphene (8001-35-2)			x												





COMPANY:	HARLAN-CUMBERLAND COAL	COMPANY, LLC.	ADI	DRESS GENERAL DELIVERY	, US 421 SOUTH, GRAYS KN	DB, KY 40829
COUNTY	HARLAN	NEAREST STREAM	SEAGRAVES CRI	EEK QUADRANGLE	LOUELLEN	
NPDES NO	KY0021539	DSMRE NO	848-8071	OTHER:	N/A	
KPDES POINTS	Si SG-1	108	<del></del> , <del></del>			
NEV	E A y Color	REISSUANCE OF	PERMIT XXX		CONSTRUCTION	
ACCURATE REQUIREMENT BEST OF MILES	M. 4. 18 19 19 14 15 1	IES THE THE		COAL	N-CUMBERLAND COMPANY, LLC. us 421 South, Grays knob, 1	(Y 40829
	: KPDES.DWG	DATE	[ 12/10/07		DRAWN BY:	B. WILSON

# HARLAN-CUMBERLAND COAL COMPANY, LLC.

GENERAL DELIVERY, US 421 SOUTH, GRAYS KNOB, KY 40829

Phone (606) 837-3791

Phone (606) 573-2232

December 26, 2007

Ms. Vickie Prather, Acting Supervisor Division of Water, KPDES Branch Inventory and Data Management Section Frankfort Office Park 14 Reilly Road Frankfort, Kentucky 40601

RE: KPDES Permit
No.: KY0021539
Harlan County Kentucky

Dear Ms. Prather:

Enclosed is a "Renewal" for the above referenced KPDES permit(With Fee). Water samples from each pond were collected and are currently being analyzed. These sample results will be submitted as soon as they are completed.

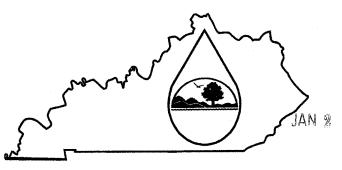
Please contact me at (606) 837-3791 if you have any questions concerning this renewal.

Respectfully,

Brandon Wilson

# **KPDES FORM 1**

AI: 1737



### KENTUCKY POLLUTANT DISCHARGE ELIMINATION SYSTEM

2008

### PERMIT APPLICATION

~		
This is an application to: (check of	one)	A complete application consists of this form and one of the
Apply for a new permit.	inc)	following:
Apply for reissuance of exp	airing nermit	Form A, Form B, Form C, Form F, or Short Form C
Apply for a construction pe		
Modify an existing permit.	anne.	For additional information contact: \$240.00
	na vandon Itom II. A	KPDES Branch (502) 564-3410
Give reason for modification	on under item II.A.	AGENCY (302) 304-3410
I. FACILITY LOCATION AND		USE 0 0 7 1 3 3 9
A. Name of business, municipality, comp Harlan Cumberland Coal Company, LLC	any, etc. requesting permit	
B. Facility Name and Location		C. Facility Owner/Mailing Address
Facility Location Name:		Owner Name:
Harlan-Cumberland Coal Company, LLC		Harlan Cumberland Coal Company LLC
Facility Location Address (i.e. street, road		Mailing Street:
274		General Delivery, US 421 South (P.O. Box 269)
Route I Box 374 Facility Location City, State, Zip Code:		Mailing City, State, Zip Code:
Evarts, Kentucky 40828		Grays Knob, Kentucky 40829 Telephone Number:
		606-837-3791
II. FACILITY DESCRIPTION	를 받아 있는데 그는데 그는데 되었다. 18 2일 - 19 2일 - 19 2일 1일 1일 1일 1일 1일 1일 1일 1일 1일 1일 1일 1일 1일	***하는 이 마음이 되었다. 이 마음을 통해 되었다. 그는 그는 사람이 다른 사람이 되었다. 이 나를 보고 있다. 그는 사람이 되었다. 그는 사람이 되었다. 그는 사람이 되었다. 그는 사람이 되었다. 그는 사람이 되었다. 그는 사람이 되었다. 그는 사람이 되었다. 그는 사람이 되었다. 그는 사람이 되었다. 그는 사람이 되었다. 그는 사람이 되었다. 그는 사람이 되었다. 그는 사람이 되었다. 그는 사람이 되었다. 그는 사람이 되었다. 그는 사람이 되었다면서 되었다. 그는 사람이 되었다면서
system wich utilizes a slurry	impoundment structure and sedime	ent pond for the processing of raw coal.
B. Standard Industrial Classificat	ion (SIC) Code and Description	다른 사람들은 살림이 보고 있다면 하는데 하는데 그 때문에 다른데 다른데 다른데 다른데 다른데 다른데 다른데 다른데 다른데 다른데
Principal SIC Code &		
Description:	1221-Coal Preparation Plant & In	npoundment
Other SIC Codes:		
III. FACILITY LOCATION	7.1/	the site (Conjugatory)
	vey 7 ½ minute quadrangle map for	City of the Continue of City of Least of City of City of Land City of City of Least of City of
B. County where facility is locate	ed:	City where facility is located (if applicable):
Harlan		N/A
C. Body of water receiving disch		
Seagraves Creek of the Clover Fo		72 12 G2 1 2 1 (1 2 1 1 1 1 1 1 1 1 1 1 1 1 1
D. Facility Site Latitude (degrees	s, minutes, seconds):	Facility Site Longitude (degrees, minutes, seconds):
36-52-57		83-06-58
E. Method used to obtain latitude	e & longitude (see instructions):	USGS 7 !/2 Minute Quad
F. Facility Dun and Bradstreet N	umber (DUNS #) (if applicable):	

IV. OWNER/OPERATOR INFORMAT	ION		
A. Type of Ownership: ☐ Publicly Owned ☐ Privately Owned		Both Public and Priva	ate Owned  Federally owned
B. Operator Contact Information (See instr	uctions)	Tall N	
Name of Treatment Plant Operator: Harlan Cumberland Coal Company, LLC.		Telephone Number: 606-837-3791	
Operator Mailing Address (Street):			
Route 1 Box 374			
Operator Mailing Address (City, State, Zip Code): Evarts, KY 40828			
Is the operator also the owner?			f yes, list certification class and number below.
Yes No Certification Class:		Yes No Certification Number:	
Certification Class.		Certification Number.	
V. EXISTING ENVIRONMENTAL PER	RMITS		
Current NPDES Number:	Issue Date of Current Perr	nit:	Expiration Date of Current Permit:
KY0021539	July 1, 2004		June 30, 2008
Number of Times Permit Reissued:	Date of Original Permit Is	suance:	Sludge Disposal Permit Number:
3	Sept, 16,1983		N/A
Kentucky DOW Operational Permit #:	Kentucky DSMRE Permit	Number(s):	
N/A	848-8071		
C. Which of the following additional enviro	onmental permit/registra	ntion categories will als	o apply to this facility?
CATEGORY	EXISTING PER	RMIT WITH NO.	PERMIT NEEDED WITH PLANNED APPLICATION DATE
Air Emission Source	N/A		
Solid or Special Waste	N/A		
Hazardous Waste - Registration or Permit	N/A		
	bmit DMRs to the Div ves to specifically ident		egular schedule (as defined by the KPDES ce or individual you designate as responsible
A. Name of department, office or official su	abmitting DMRs:	Harlan Cumberland C	Coal Company, LLC
B. Address where DMR forms are to be sen	at. (Complete only if add	dress is different from r	nailing address in Section I.)
DMR Mailing Name:	same		
DMR Mailing Street:			
DMR Mailing City, State, Zip Code:		,	
DMR Official Telephone Number:			

X 7 S T	APPI 1	TIANI	17.11	TRIC	

KPDES regulations require that a permit applicant pay an application filing fee equal to twenty percent of the permit base fee. Please examine the base and filing fees listed below and in the Form 1 instructions and enclose a check payable to "Kentucky State Treasurer" for the appropriate amount. Descriptions of the base fee amounts are given in the "General Instructions."

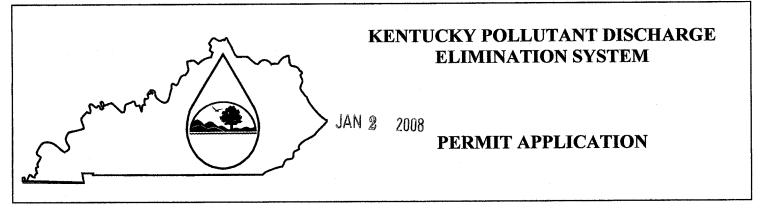
Facility Fee Category:	Filing Fee Enclosed:
Surface Mining Operation	\$240.00

#### VIII. CERTIFICATION

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

NAME AND OFFICIAL TITLE (type or print):	TELEPHONE NUMBER (area code and number):
Joseph T. Bennett, Managing Member	606-573-2232
SIGNATURE	DATE:
Son 2 Bennett	12/26/07

## **KPDES FORM C**



A complete application consists of this form and Form 1. For additional information, contact KPDES Branch, (502) 564-3410.

Name of Facility: Harlan-Cumberland Coal Company, LLC.	County: Harlan
I. OUTFALL LOCATION	AGENCY USE

For each outfall list the latitude and longitude of its location to the nearest 15 seconds and the name of the receiving water.

Outfall No.		LATITUDE			LONGITUDE	3	
(list)	Degrees	Minutes	Seconds	Degrees	Minutes	Seconds	RECEIVING WATER (name)
SG-1	36	53	34	83	06	57	Seagraves Creek
108	36	53	43	83	07	05	Seagraves Creek

#### II. FLOWS, SOURCES OF POLLUTION, AND TREATMENT TECHNOLOGIES

- A. Attach a line drawing showing the water flow through the facility. Indicate sources of intake water, operations contributing wastewater to the effluent, and treatment units labeled to correspond to the more detailed descriptions in Item B. Construct a water balance on the line drawing by showing average flows between intakes, operations, treatment units, and outfall. If a water balance cannot be determined (e.g., for certain mining activities), provide a pictorial description of the nature and amount of any sources of water and any collection or treatment measures.
- B. For each outfall, provide a description of: (1) all operations contributing wastewater to the effluent, including process wastewater, sanitary wastewater, cooling water, and storm water runoff; (2) the average flow contributed by each operation; and (3) the treatment received by the wastewater. Continue on additional sheets if necessary.

OUTFALL NO.	OPERATION(S) CONTRIBUT	ING FLOW	TREATMENT	
(list)	Operation (list)	Avg/Design Flow (include units)	Description	List Codes from Table C-1
SG-1	Preparation Plant	250 GPM	Sedimentation Pond	1-U
108	Unit Train Loadout	100 GPM	Sedimentation Pond	1-U

	Yes (Complete the	following ta	ıble.)	$\boxtimes$	No (Got	o Section III.)		
OUTTO	OPERATIONS	FREQU	ENCV			FLOW		****
OUTFALL NUMBER	CONTRIBUTING FLOW	Days Per Week	Months Per Year	Flow (in p		olume Duration (in days)		
(list)	(list)	(specify average)	(specify average)	Long-Term Average	Maximum Daily	Long-Term Average	Maximum Daily	
	IUM PRODUCTION		gated by F	PA under Secti	on 304 of the C	lean Water Act a	poly to your fa	acility?
	Yes (Complete Ite						7 X - 7 20 7 0 000 X	· <b>y</b> -
	No (Go to Section	IV)						
Are the li	mitations in the applic	able effluent	guideline	expressed in ter	ms of production	on (or other meas	ures of operati	ion)?
	Yes (Complete Ite	m III-C)	$\boxtimes$	No (Go to S	ection IV)			
	swered "Yes" to Iten n, expressed in the ten							
Quantity Per	the second control of the second control of	MAXIMUN Measure		peration, Prod	uct, Material,	Etc.	Affected O (list outfall n	utfalls
Juantity Per	the second control of the second control of			peration, Prod		Etc.	Affected O	utfalls
	DVEMENTS	Measure		peration, Prod (sp	ecify)		Affected O (list outfall n	utfalls umbers)
V. IMPRO  . Are you upgrading discharge	Day Units of	Measure  / federal, statewater equiplication?	ate or local	neration, Prod (sp al authority to r practices or a s, but is not li	meet any impany other envi	elementation scheronmental progrit conditions, adu	Affected O (list outfall n edule for the ams which m ministrative or	umbers)  construction ay affect the
V. IMPRO  . Are you upgrading discharge orders, en	DVEMENTS  now required by any g, or operation of was s described in this ap aforcement compliance  Yes (Complete the	Measure  / federal, structure equiplication? To eschedule let	ate or loca uipment or his include tters, stipul	al authority to practices or a s, but is not liations, court or	meet any impany other envi	elementation scheronmental progretic conditions, adder loan conditions	Affected O (list outfall n edule for the ams which m ministrative or	umbers)  construction ay affect the
V. IMPRO  . Are you upgrading discharge orders, en	DVEMENTS  now required by any g, or operation of was described in this ap	/ federal, statestewater equiplication? To exchedule leterate following to	ate or loca uipment or his include tters, stipul	al authority to practices or a s, but is not liations, court or No	meet any imp any other envi mited to, permi ders and grant of	elementation scheronmental progretic conditions, adder loan conditions	Affected O (list outfall n	umbers)  construction ay affect the
/. IMPRO . Are you upgrading discharge orders, en	DVEMENTS  now required by any g, or operation of was s described in this ap aforcement compliance  Yes (Complete the	y federal, statestewater equiplication? To exchedule let	ate or location of the control of th	al authority to practices or a s, but is not liations, court or No	meet any imp any other envi mited to, permi ders and grant of	elementation scheronmental progratic conditions, adder loan conditions	Affected O (list outfall n edule for the ams which m ministrative or	construction ay affect the

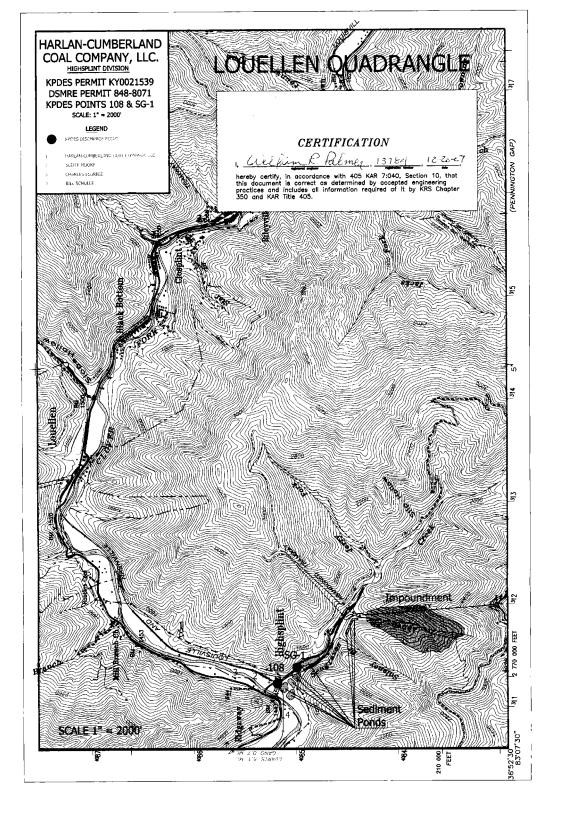
program is now under way or planned, and indicate your actual or planned schedules for construction.

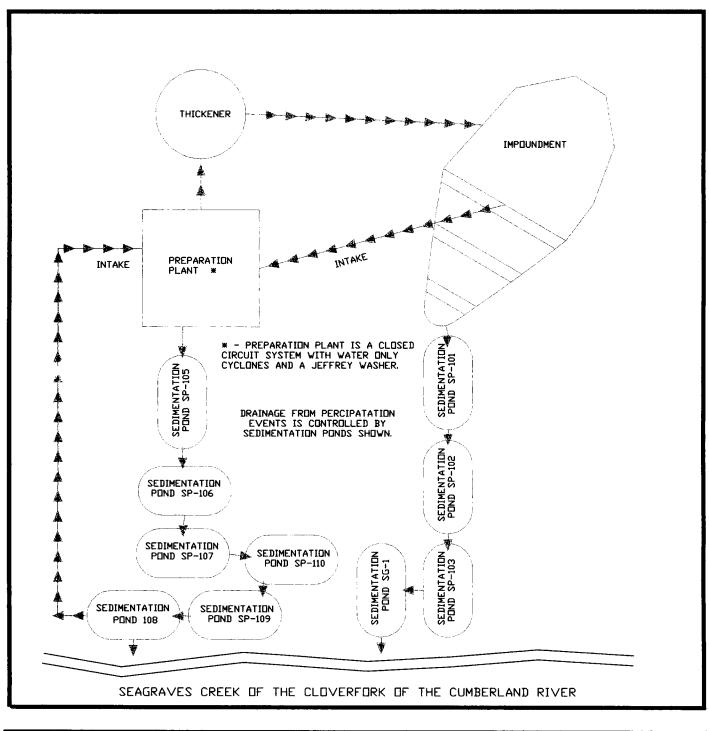
VI. PO				
VI. PO				
VI. PO				
	TENTIAL DISCHARGES	NOT COVERED BY A	ANALYSIS	
A. Is a proc		C a substance or a compo	onent of a substance which you use or pro	oduce, or expect to use or
	Yes (List all such po	ollutants below)	No (Go to Item VI-B)	ı
R Are	your operations such that you	ur raw materials process	ses, or products can reasonably be expect	ted to vary so that your
disc	charge of pollutants may durin	g the next 5 years excee	ed two times the maximum values reported	ed in Item V?
exp	Yes (Complete Item ou answered "Yes" to Item Viceted levels of such pollutants litional sheets if you need mor	I-B, explain below and d which you anticipate w	No (Go to Item VII)  describe in detail to the best of your ability  rill be discharged from each outfall over	ty at this time the sources an the next 5 years. Continue o
	The state of the s			And the second s

3

Revised June 1999

VII. BIOLOGICAL TOXICI					
Do you have any knowledge of o discharges or on a receiving water	or reason to believe that any biolog or in relation to your discharge with	ical test for acute or chronic thin the last 3 years?	toxicity has been made on any of your		
Yes (Identify t	he test(s) and describe their purpos	es below)	No (Go to Section VIII)		
<u></u>		.,			
VIII. CONTRACT ANALYS	SIS INFORMATION				
	ed in Item V performed by a contra	ct laboratory or consulting fi	rm?		
	ame, address, and telephone number by each such laboratory or firm be		No (Go to Section IX)		
NAME	ADDRESS	TELEPHONE (Area code & number	POLLUTANTS ANALYZED (list)		
ENVIRONMENTAL & ENERGY SERVICES, INC.	309 RIVER STREET SUITE 2 HARLAN KENTUCKY 40831	606-573-2552	Flow, pH, total suspended solids, total iron, total manganese, total hardness, sulfates Antimony, Arsenic, Beryllium, Cadmium, Chromium (Total) Copper, Lead, Mercury, Nickel, Selenium, Silver, Thallium, Zinc, Cyanide, Phenols		
with a system designed to assure of the person or persons who m submitted is, to the best of my l	e that qualified personnel properly anage the system, or those persons	gather and evaluate the infor s directly responsible for gat te, and complete. I am award	direction or supervision in accordance mation submitted. Based on my inquiry hering the information, the information e that there are significant penalties for olations.		
NAME AND OFFICIAL TITLE	E (type or print):	TELEPHONE N	UMBER (area code and number):		
Joe T. Bennett, Member		(606) 837 - 3791			
SIGNATURE		DATE	6-		





COMPANY	HARLAN-CUMBERLAND CO	AL COMPANY, LLC.		ADDRESS	GENERAL DELIVERY	, US 421 SOUTH,	GRAYS KNOB, KY	4082
COUNTY	HARLAN	NEAREST STREAM	SEAGRAVE	S CREEK	QUADRANGLE	LOUELLEN		
NPDES NO	KY0021539	DSMRE NO	848-8071		OTHER:	N/A		
KPDES POINTS	SG-1	108	<u></u>	· · · · · ·	<del></del>			
NEV		REISSUANCE D	F PERMIT	xxx		CONSTRUCTION	N	
ACCURATE A	CERTIFY THAT THE ABO AND CORRECT AND SATI ITS OF 805 KAR 1:030 Y KNOWLEDGE AND BELI	SFIES THE TO THE		R	п. l. \			
Peho P.	/cc//a/	3784				N-CUMBERLAND		
SIG	GNATURE R	EGISTRATION NOS.		0		COMPANY, LLC.		
	SNATURE R Palmer	EGISTRATION NOS. <del>7/15/04</del> - 1/222	7		GENERAL DELIVERY,			:9
Mike			7					:9